PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/539,992			ing Date 12/2006	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	<u> </u>	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b), (\neg	N/A	LD NO	N/A		N/A	TEE (a)	i	N/A	TEE (8)	
┢	SEARCH FEE	or (c))	N/A		N/A		N/A		1	N/A		
H	(37 CFR 1.16(k), (i), (ii)		N/A	+	N/A		N/A		ł	N/A		
	(37 CFR 1.16(o), (p), r TAL CLAIMS	or (q))	minus 20 =				x \$ =		OR	x s =		
INE	CFR 1.16(i)) EPENDENT CLAIM	s	minus 3 = *				x s =			x s =		
	CFR 1.16(h))	shee	specifica	gs exceed 100 on size fee due	ı			1				
	APPLICATION SIZE (37 CFR 1.16(s))	FEE is \$2 addit	50 (\$125 ional 50 s	for each n thereof. See CFR 1.16(s).								
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))								1			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.								1	TOTAL		
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY										ER THAN		
AMENDMENT	_	CLAIMS		HIGHEST	(Column 3)		SMALL ENTITY		OK	J J J	I ENTITY	
	09/19/2008	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	· 79	Minus	~ 93	=	1	x \$ =		OR	x s =		
	Independent (37 CFR 1.16(h))	• 3	Minus	···6	=	1	x \$ =		OR	x s =		
	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus			1	x \$ =		OR	x \$ =		
	Independent (37 CFR 1,16(h))		Minus	***]	x \$ =		OR	x s =		
ä	Application Size Fee (37 CFR 1.16(s))]			1			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR			
									OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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